TRANSMITTAL FORM (to be used for all correspondence after initial filing) Total Number of Pages in This Submission	U.S. Pater is are required to respond to a collection Application Number Filing Date First Named Inventor Art Unit Examiner Name Attorney Docket Number	July Warr 3643 Betha	rmation unless it di 22,157 17, 2003 en R. White	PTO/SB/2: nrough 08/30/2003. OMB 06 S. DEPARTMENT OF CON isplays a valid OMB control	651-0031	
ENCLOSURES (Check all that apply)						
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addi Terminal Disclaimer Request for Refund CD, Number of CD(s)	ress	to Tech Appeal of Appeal Appeal (Appeal Propriet	inclosure(s) (please below):	d	
	OF APPLICANT, ATTORN	IEY, O	R AGENT			
	CATE OF TRANSMISSION			tod States Dental Society	a with	
I hereby certify that this correspondence is being face sufficient postage as first class mail in an envelope at the date shown below. Typed or printed name	simile transmitted to the USPTO o ddressed to: Commissioner for Pa	r aepos itents, F	nea with the Unit P.O. Box 1450, A	leu States Postal Servici lexandria, VA 22313-14	50 on	
Ella R. Sisco	. Sises		Da	ate July 14, 2004		

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PTO/SB/17 (10-03)
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Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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C	omplete if Known
Application Number	10/622,157
Filing Date	July 17, 2003
First Named Inventor	Warren R. White
Examiner Name	Bethany L. Giles
Art Unit	3643
Attorney Docket No.	2106-00101

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES					
Order U		ntity	Small	Entity		
✓ Deposit Account: Deposit Account 03-2769	Fee I Code			Fee (\$)	Fee Description	Fee Paid
Number	1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit Account Name Conley Rose, P.C.	1052	50	2052		Surcharge - late provisional filing fee or cover sheet	
Name The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	
Charge fee(s) indicated below	1812 2	,520	1812 2	2,520	For filing a request for ex parte reexamination	<u> </u>
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805 1	,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	1251	110	2251	55	Extension for reply within first month	
FEE CALCULATION	1252	420	2252	210	Extension for reply within second month	
1. BASIC FILING FEE Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Fee Description Fee Paid	1254 1	,480	2254	740	Extension for reply within fourth month	
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255 2	,010	2255	1,005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	165.00
1003 530 2003 265 Plant filing fee	1402	330	2402		Filing a brief in support of an appeal	165.00
1004 770 2004 385 Reissue filing fee	1403	290	2403		Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451 1	.510	1451	1.510	Petition to institute a public use proceeding	
	1452	110	2452	•	Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 00.00		330	2453		Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1	330	2501	665	Utility issue fee (or reissue)	
Extra Claims below Fee Paid	1502	480	2502	240	Design issue fee	
Total Claims 20 - = X = =	1503	640	2503	320	Plant issue fee	
Independent 3 - = X = Multiple Dependent		130	1460	130	Petitions to the Commissioner	
		50	1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806	180	Submission of Information Disclosure Stmt	
Fee	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection	
1201 66 2201 43 independent claims in excess of 3	1810	770	2810	385	(37 CFR 1.129(a)) For each additional invention to be	
1204 86 2204 43 ** Reissue independent claims					examined (37 CFR 1.129(b))	
over original patent	1801	770	2801		Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 00.00	Other fe	ee (sp	ecify) _			
**or number previously paid, if greater; Fer Reissues, see above Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 330.00					00	
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Name (Print/Type)

Signature

Date

Telephone 713-238-8000

July 14, 2004